**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Prudential Financial, Inc. State & Federal Political Action Committee (AKA Prudential State & Federal PAC) 751 Broad Street ADDRESS (number and street) 22nd Floor (Check if address is changed) Newark 07102 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS john.feeney@prudential.com (Check if address is changed) Optional Second E-Mail Address jill.l.johnson@prudential.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 31 2022 C00493304 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Feeney, John, , Mr., Type or Print Name of Treasurer Feeney, John, , Mr., [Electronically Filed] 05 31 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

| FEC Form 1 (Revised 03/2022)   | Page <b>2</b>   |
|--|---|
| TYPE OF COMMITTEE:   |   |
| Candidate Committee:   |   |
| (a) This committee is a principal campaign committee.  | Complete the candidate information below.)  |
| (b) This committee is an authorized committee, and is information below.)                                      | NOT a principal campaign committee. (Complete the candidate   |
| Name of Candidate  |   |
| Candidate Office Party Affiliation Sought: H   | State Duse Senate President District  |
| (c) This committee supports/opposes only one candidate   | e, and is NOT an authorized committee.  |
| Name of Candidate  |   |
| Party Committee:   |   |
| (d) This committee is a (National, Sta   | (Democratic, Party Party  |
| Political Action Committee (PAC):  |   |
| (e) This committee is a separate segregated fund. (Ider  | tify connected organization on line 6.) Its connected organization is a   |
| Corporation Corp   | poration w/o Capital Stock Labor Organization   |
| Membership Organization Trac   | e Association Cooperative   |
| X In addition, this committee is a Lobbyist/R  | egistrant PAC.  |
| (f) This committee supports/opposes more than one Fe committee. (i.e., nonconnected committee)                 | ederal candidate, and is NOT a separate segregated fund or party  |
| In addition, this committee is a Lobbyist/R  | egistrant PAC.  |
| In addition, this committee is a Leadership  | PAC. (Identify sponsor on line 6.)  |
| (g) This committee is an independent expenditure-only  | political committee (Super PAC).  |
| In addition, this committee is a Lobbyist/R  | egistrant PAC.  |
| (h) This committee is a political committee with both co   | ntribution and non-contribution accounts (Hybrid PAC).  |
| In addition, this committee is a Lobbyist/R  | egistrant PAC.  |
| Joint Fundraising Representative:  |   |
| (i) This committee collects contributions, pays fundraisi committees/organizations, at least one of which is a | ng expenses and disburses net proceeds for two or more political n authorized committee of a federal candidate. |
| (j) This committee collects contributions, pays fundraisi committees/organizations, none of which is an author | ng expenses and disburses net proceeds for two or more political orized committee of a federal candidate.       |
| Committees Participating in Joint Fundraiser   |   |
| 1.   | C   |
| . 1  | C   |

|            | FEC Form 1 (Revised 0                                      | 2/2009)  | Page 3                |
|------------|--|--|-----------------------|
| V          | Vrite or Type Committee Name                               |  | 0.5   1.540)          |
|            |  | c. State & Federal Political Action Committee (AKA Prudential Stat                                 |                       |
| <b>3</b> . | Prudential Financial,                                      | ganization, Affiliated Committee, Joint Fundraising Representative, or Leado                       | ersnip PAC Sponsor    |
|            |  |  |                       |
|            |  |  |                       |
|            | Mailing Address  | 751 Broad Street   |                       |
|            |  |  |                       |
|            |  | Newark   | 2                     |
|            |  | CITY ▲ STATE ▲   | ZIP CODE ▲            |
|            | Relationship: X Connected                                  | Organization Affiliated Organization Joint Fundraising Representative                              | Leadership PAC Sponso |
|            |  |  |                       |
| 7.         | Custodian of Records: Idention books and records.          | fy by name, address (phone number optional) and position of the person in posse                    | ssion of committee    |
|            | Johnson, Ji  | II, , Ms.,   |                       |
|            | Full Name  |  |                       |
|            | Mailing Address  | 751 Broad Street   |                       |
|            |  | 22nd Floor   |                       |
|            |  | Newark NJ 0710   | 2                     |
|            |  | CITY ▲ STATE ▲   | ZIP CODE ▲            |
|            | Title or Position ▼  | G.1.1 = G.1.12 =   |                       |
|            | Record Keeper  | Telephone number 202 –   | 239 - 4875            |
| 8.         | Treasurer: List the name and any designated agent (e.g., a | d address (phone number optional) of the treasurer of the committee; and the assistant treasurer). | name and address of   |
|            | Full Name Feeney, Jo                                       | nn, , Mr.,   |                       |
|            | of Treasurer   |  |                       |
|            | Mailing Address  | 751 Broad Street 22nd Floor  |                       |
|            |  |  |                       |
|            |  | Newark NJ 0710   | 2                     |
|            | Title or Position <b>▼</b>                                 | CITY ▲ STATE ▲   | ZIP CODE ▲            |
|            |  |  |                       |

| FEC Form 1                           | (Revised 02/2009)  | Page <b>4</b>       |
|--------------------------------------|--|---------------------|
| Full Name of<br>Designated<br>Agent  |  |                     |
| Mailing Address                      |  |                     |
|                                      |  |                     |
|                                      |  |                     |
| Title or Position                    | CITY ▲ STATE ▲   | ZIP CODE ▲          |
|                                      |  |                     |
| Banks or Other<br>safety deposit box | <b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holices or maintains funds. | lds accounts, rents |
| Name of Bank, D                      | pepository, etc.   |                     |
| Mailing Address                      | Citibank  388 Greenwich Street   |                     |
|                                      |  |                     |
|                                      | New York NY 10013  |                     |
|                                      | CITY ▲ STATE ▲   | ZIP CODE ▲          |
| Name of Bank, D                      | pepository, etc.   |                     |
|                                      | Industrial Bank  |                     |
| Mailing Address                      | 4812 Georgia Avenue, NW  |                     |
|                                      |  |                     |
|                                      | Washington DC 20011  |                     |
|                                      | CITY ▲ STATE ▲   | ZIP CODE ▲          |

## : 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

The FEC Form 1 is being amended to name a new treasurer, update the street address and to update the email addresses.

Form/Schedule: Transaction ID:

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

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| h). <b>Joint Fundraisi</b> r  |  | l EEC                  | ID number      | С                      |
|---|--|------------------------|----------------|------------------------|
| 1.  |  |                        |                |                        |
| 2.  |  |                        | ID number      | С                      |
| 3.  |  | FEC                    | ID number      | С                      |
| 4.  |  | FEC                    | ID number      | C                      |
| =   | Organization, Affiliated Committee   | _                      | -              |                        |
|   |  |                        |                |                        |
|   |  |                        |                |                        |
| Mailing Address   | 751 Broad Street   |                        |                |                        |
|   | 22nd Floor   |                        |                |                        |
|   | Newark   |                        | NJ             | 07102-3777             |
| Relationship:   | CITY ▲   |                        | STATE A        | ZIP CODE ▲             |
|   |  |                        |                |                        |
| Connecte  | 1 Organization X Affiliated Committ  | ee Joint Fundrais      | ing Represent  | ative Leadership PAC S |
|   | Affiliated Committee of the Af |                        | ing Represent  | ative Leadership PAC S |
|   |  |                        | ng Represent   | ative Leadership PAC S |
| esignated Agent: Identif  |  |                        | ng Represent   | ative Leadership PAC S |
| esignated Agent: Identif  |  |                        | ng Represent   | ative Leadership PAC S |
| esignated Agent: Identif  |  | - optional)            | ng Represent   | ative Leadership PAC S |
| esignated Agent: Identif  | by name, address (phone number   | - optional)            | Represent      |                        |
| esignated Agent: Identif  Full Name  Mailing Address  | by name, address (phone number   | - optional)            | STATE A        |                        |
| esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION   | by name, address (phone number  CITY   ries: List all banks or other deposite  | - optional)  Telephone | STATE A Number | ZIP CODE A             |
| Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or mail                                | by name, address (phone number  CITY   ries: List all banks or other deposite  | - optional)  Telephone | STATE A Number | ZIP CODE A             |
| Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials.                            | by name, address (phone number  CITY   ries: List all banks or other deposite  | - optional)  Telephone | STATE A        | ZIP CODE A             |
| Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials.                            | by name, address (phone number  CITY   ries: List all banks or other deposite  | - optional)  Telephone | STATE A        | ZIP CODE A             |
| Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc. | by name, address (phone number  CITY   ries: List all banks or other deposite  | - optional)  Telephone | STATE A        | ZIP CODE A             |